Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2026 (Chart 1 of 5)

Chart 1:

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME Employee & Domestic Partner		
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	INDIVIDUAL-2 ADULTS		
MEDICAL PLANS					Annual	Semimonthly	Weekly
Core PPO (non-union)	\$10,951.92	\$16,468.32	\$22,831.44	\$28,653.36	\$11,879.52	\$494.98	\$228.45
Enhanced PPO (non-union)	\$11,512.08	\$17,310.72	\$23,999.52	\$30,119.04	\$12,487.44	\$520.31	\$240.14
Core PPO (union)	\$12,870.48	\$18,714.72	\$18,714.72	\$33,680.40	\$5,844.24	\$243.51	\$112.39
LiUNA Network (union)	\$15,742.80	\$22,891.44	\$32,911.20	\$41,196.00	\$17,168.40	\$715.35	\$330.16
Kaiser Permanente (non-union)	\$10,522.56	\$19,991.76	\$22,096.32	\$31,566.60	\$11,573.76	\$482.24	\$222.57
Kaiser Permanente (union)	\$11,940.12	\$22,685.04	\$25,073.04	\$35,817.96	\$13,132.92	\$547.21	\$252.56
Limited PPO	\$7,970.16	\$11,984.16	\$16,615.44	\$20,852.16	\$8,645.28	\$360.22	\$166.26
BCBS CDHP (non-union)<\$40,000	\$9,960.32	\$15,225.04	\$20,721.28	\$25,750.24	\$10,760.96	\$448.37	\$206.94
BCBS CDHP (non-union)>\$40,001<\$60,000	\$9,710.32	\$14,725.04	\$20,221.28	\$25,250.24	\$10,510.96	\$437.96	\$202.13
BCBS CDHP (non-union)>\$60,000	\$9,460.32	\$14,225.04	\$19,721.28	\$24,750.24	\$10,260.96	\$427.54	\$197.33
BCBS HI/HHWP (PPP)	\$29,485.68	\$58,971.36	\$58,971.36	\$88,457.04	\$29,485.68	\$1,228.57	\$567.03
DENTAL PLANS							
Delta Core PPO (non-union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$378.84	\$15.79	\$7.29
Delta Core PPO (union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$378.84	\$15.79	\$7.29
Delta Enhanced (non-union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$515.16	\$21.47	\$9.91
Delta Enhanced (union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$515.16	\$21.47	\$9.91
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$51.72	\$2.16	\$0.99
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$51.72	\$2.16	\$0.99
ACCIDENTAL DEATH &							
DISMEMBERMENT							
	\$0.014 per						
\$10,000.00	\$1,000			\$0.014 per \$1,000			
	\$0.014 per			•			
\$50,000.00	\$1,000			\$0.025 per \$1,000			
	\$0.014 per			•			
1 - 8 times salary	\$1,000			\$0.025 per \$1,000			

Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2026 (Chart 2 of 5)

Chart 2:

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
					Employ	ner's child(ren)	
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	IND	HILD(REN)	
MEDICAL PLANS					Annual	Semimonthly	Weekly
Core PPO (non-union)	\$10,951.92	\$16,468.32	\$22,831.44	\$28,653.36	\$5,516.40	\$229.85	\$106.08
Enhanced PPO (non-union)	\$11,512.08	\$17,310.72	\$23,999.52	\$30,119.04	\$5,798.64	\$241.61	\$111.51
Core PPO (union)	\$12,870.48	\$18,714.72	\$18,714.72	\$33,680.40	\$5,844.24	\$243.51	\$112.39
LiUNA Network (union)	\$15,742.80	\$22,891.44	\$32,911.20	\$41,196.00	\$7,148.64	\$297.86	\$137.47
Kaiser Permanente (non-union)	\$10,522.56	\$19,991.76	\$22,096.32	\$31,566.60	\$9,469.20	\$394.55	\$182.10
Kaiser Permanente (union)	\$11,940.12	\$22,685.04	\$25,073.04	\$35,817.96	\$10,744.92	\$447.71	\$206.63
Liimited PPO	\$7,970.16	\$11,984.16	\$16,615.44	\$20,852.16	\$4,014.00	\$167.25	\$77.19
BCBS CDHP (non-union)<\$40,000	\$9,960.32	\$15,225.04	\$20,721.28	\$25,750.24	\$5,264.72	\$219.36	\$101.24
BCBS CDHP (non-union)>\$40,001<\$60,000	\$9,710.32	\$14,725.04	\$20,221.28	\$25,250.24	\$5,014.72	\$208.95	\$96.44
BCBS CDHP (non-union)>\$60,000	\$9,460.32	\$14,225.04	\$19,721.28	\$24,750.24	\$4,764.72	\$198.53	\$91.63
BCBS HI/HHWP (PPP)	\$29,485.68	\$58,971.36	\$58,971.36	\$88,457.04	\$29,485.68	\$1,228.57	\$567.03
DENTAL PLANS							
Delta Core PPO (non-union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$329.28	\$13.72	\$6.33
Delta Core PPO (union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$329.28	\$13.72	\$6.33
Delta Enhanced (non-union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$447.84	\$18.66	\$8.61
Delta Enhanced (union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$447.84	\$18.66	\$8.61
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$118.68	\$4.95	\$2.28
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$118.68	\$4.95	\$2.28
ACCIDENTAL DEATH &							
DISMEMBERMENT							
	\$0.014 per						
\$10,000.00	\$1,000			\$0.014 per \$1,000			
	\$0.014 per			·			
\$50,000.00	\$1,000			\$0.025 per \$1,000			
	\$0.014 per			•			
1 - 8 times salary	\$1,000			\$0.025 per \$1,000			

Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2026 (Chart 3 of 5)

Chart 3:

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
						Domestic Partner & I child(ren)	
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	INDIVIDUAL-2 ADULTS+CHILD(REN)		
MEDICAL PLANS					Annual	Semimonthly	Weekly
Core PPO (non-union)	\$10,951.92	\$16,468.32	\$22,831.44	\$28,653.36	\$17,701.44	\$737.56	\$340.41
Enhanced PPO (non-union)	\$11,512.08	\$17,310.72	\$23,999.52	\$30,119.04	\$18,606.96	\$775.29	\$357.83
Core PPO (union)	\$12,870.48	\$18,714.72	\$18,714.72	\$33,680.40	\$20,809.92	\$867.08	\$400.19
LiUNA Network (union)	\$15,742.80	\$22,891.44	\$32,911.20	\$41,196.00	\$25,453.20	\$1,060.55	\$489.48
Kaiser Permanente (non-union)	\$10,522.56	\$19,991.76	\$22,096.32	\$31,566.60	\$21,044.04	\$876.84	\$404.69
Kaiser Permanente (union)	\$11,940.12	\$22,685.04	\$25,073.04	\$35,817.96	\$23,877.84	\$994.91	\$459.19
Limited PPO	\$7,970.16	\$11,984.16	\$16,615.44	\$20,852.16	\$12,882.00	\$536.75	\$247.73
BCBS CDHP (non-union)<\$40,000	\$9,960.32	\$15,225.04	\$20,721.28	\$25,750.24	\$15,789.92	\$657.91	\$303.65
BCBS CDHP (non-union)>\$40,001<\$60,000	\$9,710.32	\$14,725.04	\$20,221.28	\$25,250.24	\$15,539.92	\$647.50	\$298.84
BCBS CDHP (non-union)>\$60,000	\$9,460.32	\$14,225.04	\$19,721.28	\$24,750.24	\$15,289.92	\$637.08	\$294.04
BCBS HI/HHWP (PPP)	\$29,485.68	\$58,971.36	\$58,971.36	\$88,457.04	\$58,971.36	\$2,457.14	\$1,134.06
DENTAL PLANS							
Delta Core PPO (non-union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$1,102.08	\$45.92	\$21.19
Delta Core PPO (union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$1,102.08	\$45.92	\$21.19
Delta Enhanced (non-union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$1,500.60	\$62.53	\$28.86
Delta Enhanced (union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$1,500.60	\$62.53	\$28.86
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$118.68	\$4.95	\$2.28
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$118.68	\$4.95	\$2.28
ACCIDENTAL DEATH &							
DISMEMBERMENT							
	\$0.014 per						
\$10,000.00	\$1,000			\$0.014 per \$1,000			
	\$0.014 per						
\$50,000.00	\$1,000			\$0.025 per \$1,000			
	\$0.014 per			¢0.025 ¢4.000			
1 - 8 times salary	\$1,000			\$0.025 per \$1,000			

Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2026 (Chart 4 of 5)

Chart 4:

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
		ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	Employee, Employee's child(ren), Domestic Partner, & Domestic Partner's child(ren) ADULT+CHILD(REN)-2 ADULTS+CHILD(REN)		
	INDIVIDUAL						
MEDICAL PLANS					Annual	Semimonthly	Weekly
Core PPO (non-union)	\$10,951.92	\$16,468.32	\$22,831.44	\$28,653.36	\$12,185.04	\$507.71	\$234.33
Enhanced PPO (non-union)	\$11,512.08	\$17,310.72	\$23,999.52	\$30,119.04	\$12,808.32	\$533.68	\$246.31
Core PPO (union)	\$12,870.48	\$18,714.72	\$18,714.72	\$33,680.40	\$14,965.68	\$623.57	\$287.80
LiUNA Network (union)	\$15,742.80	\$22,891.44	\$32,911.20	\$41,196.00	\$18,304.56	\$762.69	\$352.01
Kaiser Permanente (non-union)	\$10,522.56	\$19,991.76	\$22,096.32	\$31,566.60	\$11,574.84	\$482.29	\$222.59
Kaiser Permanente (union)	\$11,940.12	\$22,685.04	\$25,073.04	\$35,817.96	\$13,132.92	\$547.21	\$252.56
Limited PPO	\$7,970.16	\$11,984.16	\$16,615.44	\$20,852.16	\$8,868.00	\$369.50	\$170.54
BCBS CDHP (non-union)<\$40,000	\$9,960.32	\$15,225.04	\$20,721.28	\$25,750.24	\$10,525.20	\$438.55	\$202.41
BCBS CDHP (non-union)>\$40,001<\$60,000	\$9,710.32	\$14,725.04	\$20,221.28	\$25,250.24	\$10,525.20	\$438.55	\$202.41
BCBS CDHP (non-union)>\$60,000	\$9,460.32	\$14,225.04	\$19,721.28	\$24,750.24	\$10,525.20	\$438.55	\$202.41
BCBS HI/HHWP (PPP)	\$29,485.68	\$58,971.36	\$58,971.36	\$88,457.04	\$29,485.68	\$1,228.57	\$567.03
DENTAL PLANS							
Delta Core PPO (non-union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$772.80	\$32.20	\$14.86
Delta Core PPO (union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$772.80	\$32.20	\$14.86
Delta Enhanced (non-union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$1,052.76	\$43.87	\$20.25
Delta Enhanced (union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$1,052.76	\$43.87	\$20.25
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$66.96	\$2.79	\$1.29
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$66.96	\$2.79	\$1.29
ACCIDENTAL DEATH & DISMEMBERMENT							
\$10,000.00	\$0.014 per \$1,000			\$0.014 per \$1,000			
\$50,000.00	\$0.014 per \$1,000			\$0.025 per \$1,000			
1 - 8 times salary	\$0.014 per \$1,000			\$0.025 per \$1,000			

Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2026 (Chart 5 of 5)

Chart 5:

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
					Employee, Domestic Partner & Employee's child(ren)		
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	2 ADULT+CHILD(REN)-2 ADULTS		
MEDICAL PLANS					Annual	Semimonthly	Weekly
Core PPO (non-union)	\$10,951.92	\$16,468.32	\$22,831.44	\$28,653.36	\$5,821.92	\$242.58	\$111.96
Enhanced PPO (non-union)	\$11,512.08	\$17,310.72	\$23,999.52	\$30,119.04	\$6,119.52	\$254.98	\$117.68
Core PPO (union)	\$12,870.48	\$18,714.72	\$18,714.72	\$33,680.40	\$14,965.68	\$623.57	\$287.80
LiUNA Network (union)	\$15,742.80	\$22,891.44	\$32,911.20	\$41,196.00	\$8,284.80	\$345.20	\$159.32
Kaiser Permanente (non-union)	\$10,522.56	\$19,991.76	\$22,096.32	\$31,566.60	\$9,470.28	\$394.60	\$182.12
Kaiser Permanente (union)	\$11,940.12	\$22,685.04	\$25,073.04	\$35,817.96	\$10,744.92	\$447.71	\$206.63
Limited PPO	\$7,970.16	\$11,984.16	\$16,615.44	\$20,852.16	\$4,236.72	\$176.53	\$81.48
BCBS CDHP (non-union)<\$40,000	\$9,960.32	\$15,225.04	\$20,721.28	\$25,750.24	\$5,028.96	\$209.54	\$96.71
BCBS CDHP (non-union)>\$40,001<\$60,000	\$9,710.32	\$14,725.04	\$20,221.28	\$25,250.24	\$5,028.96	\$209.54	\$96.71
BCBS CDHP (non-union)>\$60,000	\$9,460.32	\$14,225.04	\$19,721.28	\$24,750.24	\$5,028.96	\$209.54	\$96.71
BCBS HI/HHWP (PPP)	\$29,485.68	\$58,971.36	\$58,971.36	\$88,457.04	\$29,485.68	\$1,228.57	\$567.03
DENTAL PLANS							
Delta Core PPO (non-union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$723.24	\$30.14	\$13.91
Delta Core PPO (union)	\$328.68	\$657.96	\$707.52	\$1,430.76	\$723.24	\$30.14	\$13.91
Delta Enhanced (non-union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$985.44	\$41.06	\$18.95
Delta Enhanced (union)	\$448.20	\$896.04	\$963.36	\$1,948.80	\$985.44	\$41.06	\$18.95
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$66.96	\$2.79	\$1.29
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$66.96	\$2.79	\$1.29
ACCIDENTAL DEATH & DISMEMBERMENT							
2.0	\$0.014 per						
\$10,000.00	\$1,000			\$0.014 per \$1,000			
	\$0.014 per			60.005 64.000			
\$50,000.00	\$1,000			\$0.025 per \$1,000			
1 - 8 times salary	\$0.014 per \$1,000			\$0.025 per \$1,000			